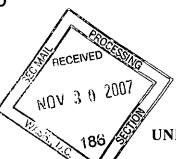
## FORM D



### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL		
0005 0070	OMB AF	PPROVAL
OMB Number 3235-0076	OMB Number:	3235-0076

Estimated average burden hours per response...... 16.00

SEC USE ONLY						
Prefix			Serial			
	1					
	DATE RE	CEIVED				
		1				

Name of Offering (  check it his is an amendment and name has changed, and indicate change.)  Lehman Brothers Offshore Loan Opportunity Capital Partners Holdings L.P.	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506	Section 4(6) ULOE
Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION DATA	1 16 E ST E SHILL LOUIS 10 E ST L 10 L 1
1. Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)  Lehman Brothers Offshore Loan Opportunity Capital Partners Holdings L.P. (the "Partnership")	07085100
Address of Executive Offices (Number and Street, City, State, Zip Code) 399 Park Avenue, New York, New York 10022	Telephone Number (Including Area Code) (212) 526-7000
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business Investment vehicle.	
Type of Business Organization  corporation  limited partnership, already formed  business trust  limited partnership, to be formed  other (please specify)	a Cayman Islands exempted limited partnership
Actual or Estimated Date of Incorporation or Organization:    Month   Year	
GENERAL INSTRUCTIONS	FINANCIAL

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

# ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

. A. BASIC IDENTIFICATION DATA											
Enter the information requested for the following:											
	-	-	thin the past five years;								
<ul> <li>Each benefi issuer;</li> </ul>	<ul> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> <li>Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer.</li> </ul>										
	tive officer and directo	r of corporate issuers and of o	corporate general and manag	ing partners of parti	nership issuers; and						
Each genera	al and managing partne	er of partnership issuers.									
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner						
Full Name (Last name first, if individual) Lehman Brothers Cayman GP Ltd. (the "General Partner")											
Business or Residence Address (Number and Street, City, State, Zip Code) 399 Park Avenue, New York, New York 10022											
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner											
Full Name (Last name first, it Rao, Ashvin	Full Name (Last name first, if individual) Rao. Ashvin										
Business or Residence Addre 399 Park Avenue, New Yor	,	, City, State, Zip Code)		-							
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner						
Full Name (Last name first, if individual) Goldfarb, Allyson											
Business or Residence Addre 399 Park Avenue, New Yor		, City, State, Zip Code)									
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner						
Full Name (Last name first, i	f individual)										
Business or Residence Addre	ss (Number and Street	, City, State, Zip Code)									
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner						
Full Name (Last name first, i	f individual)										
Business or Residence Address (Number and Street, City, State, Zip Code)											
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner						
Full Name (Last name first, if individual)											
Business or Residence Address (Number and Street, City, State, Zip Code)											
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner						
Full Name (Last name first, if individual)											
Business or Residence Address (Number and Street, City, State, Zip Code)											

					B. IN	FORMATI	ON ABOU	r offeri	NG					
2. W	hat is the m	inimum in	vestment th	Answer als at will be a	o in Append ecepted from	dix, Column n any indivic	2, if filing u	nder ULOE					YES \$25,000*	NO M
3. D 4. E si a: d	oes the offer nter the info milar remur ssociated pe	ring permi ormation re neration for rson or ag tre than fiver or dealer	t joint owner requested for resolicitation tent of a brown (5) perso	ership of a si or each pers on of purcha oker or deal os to be list	ingle unit? . son who has sers in cont er registere	s been or w nection with d with the S	ill be paid of sales of sect EC and/or v	or given, dir urities in the vith a state	rectly or inc e offering. or states, li	directly, an If a person st the name	y commission to be listed to be listed to be broken the broken the inform	on or is an er or	YES	NO
NA														
Busines	s or Residen	ce Addres	s (Number :	and Street, (	Lity, State, a	Lip Code)								
Name o	f Associated	Broker or	Dealer					.i.			<u>.</u>			
States in	Which Pers	on Listed	Has Solicit	ed or Intend	s to Solicit	Purchasers		•						
[AL] [IL] [MT] [RI]	(Check ". [AK] [IN] [NE] [SC]	All States" [AZ] [IA] [NV] [SD]	or check in [AR] [KS] [NH] [TN]	ndividual Sta [CA] [KY] [NJ] [TX]	ates) [CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] · [MA] [ND] [WA]	[FL] [M1] [OH] [WV]	[GA] [MN] [OK] [WI]	Ali [HI] [MS] [OR] [WY]	States [ID] [MO] [PA] [PR]		
Busi	ne (Last nan	dence Add	Iress (Numb	per and Stree	et, City, Stat	te, Zip Code	)				· · · · · · · · · · · · · · · · · · ·	-		
						it Purchasers	<u>.                                    </u>			*19		0		
(Check " [AL] [IL] [MT] [RI]	All States" ( [AK] [IN] [NE] [SC]	or check ir [AZ] [IA] [NV] [SD]	ndividual St [AR] [KS] [NH] [TN]	ates) [CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[AII [HI] [MS] [OR] [WY]	States [ID] [MO] [PA] [PR]		
Full Na	me (Last na	me first, if	individual)	i										
Bus	iness or Res	idence Ad	dress (Num	ber and Stre	ect, City, Sta	ite, Zip Code	:)							
Nan	ne of Associ	ated Broke	er or Dealer	•										
States	in Which P	erson List	ed Has Soli	cited or Inte	nds to Solic	it Purchaser	S							
(Check [AL] [IL] [MT] [RI]	c "All States [AK] [IN] [NE] [SC]	" or check [AZ] [IA] [NV] [SD]	individual [AR] [KS] [NH] TN]	States) [CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	All State: [ID] [MC [PA] [PR]	p] 	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

			_ <u>-</u>		
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		Aggregate Tering Price		Amount Already Sold
	Debt	S	-0-	S	-0-
	Equity	\$	-0-	\$	-0-
	Common Preferred				
	Convertible Securities (including warrants)	<u>s</u>	-0-	\$	-0-
	Partnership Interests	\$	12,700,000		12,700,000
	Other (Specify)	\$	-0-	<u> </u>	-0-
	Total	5	12,700,000	Ť.,	12,700,000
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total line. Enter "0" if answer is "none" or "zero."				Aggregate
	Accredited Investors		Number Investors 79	s	Dollar Amount of Purchases 12,700,000
	Non-accredited investors		<b>-</b> 0-	s	-0-
	Total (for filings under Rule 504 only)		NA NA	<u> </u>	NA .
3.	Answer also in Appendix, Column 4, if filing under ULOE.  If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.				
	Type of offering		Type of		Dollar Amount
	Rule 505		Security NA	\$	Sold NA
	Regulation A		NA	S	NA
	Rule 504		NA	s	NA
	Total.		NA	S	NA
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees		X	S	-0-
	Printing and Engraving Costs		🖂	\$	1,000
	Legal Fees		×	\$	56,000
	Accounting Fees		×	\$	25,000
	Engineering Fees		🖂	<u> </u>	-0-
	Sales Commissions (specify finders' fees separately)		🖂	<u> </u>	-0-
	Other Expenses (identify) <u>Travel and miscellaneous</u>	·····	🛛	<u> </u>	500

	stion 4.a. This difference is the "adjusted gross	proceeds to the	\$ 12,617,500
	ess proceeds to the issuer used or proposed to be se is not known, furnish an estimate and check and must equal the adjusted gross proceeds to t	the box to the left of	
		Payments to Officers Directors & Affiliates	
Salaries and fees	······································	S \$ -0-	<u> </u>
Purchase of real estate		<u>s -0-</u>	<u> </u>
Purchase, rental or leasing and installation of m	achinery and equipment	X_s -0-	<u> </u>
Construction or leasing of plant buildings and f	acilities	⊠s -0-	⊠ s -0-
Acquisition of other businesses (including the	value of securities involved in this		
offering that may be used in exchange for the a	ssets or securities of another	S s -0-	⊠ s -0-
•		— <u>————</u>	
Repayment of indebtedness		_	
Working capital			<u>⊠ s</u> -0-
Other (specify) Portfolio Investments		<u> </u>	\$12,617,500
			<b>5</b> 7
····	· · · · · · · · · · · · · · · · · · ·	<u> </u>	<u>⊠ s ⊸-</u>
Column Totals			\$12,617,500
Total Payments Listed (column totals added)		<u>S</u> s_	12,617,500
	D. FEDERAL SIGNATURI	<u> </u>	
The issuer has duly caused this notice to be signed by an undertaking by the issuer to furnish to the U.S. Sec non-accredited investor pursuant to paragraph (b)(2) o	urities and Exchange Commission, upon written		
Issuer (Print or Type) Lehman Brothers Offshore Loan Opportunity Capital Partners Holdings L.P.	Signature A.A.	Date 11/20	12007
Name (Print or Type)	Title of Signer (Print or Type)		•
Ashvin Rao	Director of Lehman Brothers Cayman GP	Ltd., the General Partner of the Pa	rtnership
			<del></del>

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

END

**ATTENTION** 

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).